



CANNON BUILDING
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STATE OF DELAWARE
DEPARTMENT OF STATE

DIVISION OF PROFESSIONAL REGULATION
Board of Pharmacy

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Evaluation - Continuing Education

1. Did you find the exercise beneficial?

- a. YES
- b. NO
- c. So/So

Why? Why Not? Or So/So?

2. What part of today's sessions did you like the best?

3. What was you least favorite?

4. Would you like to participate in future sessions?

5. What recommendations would you make to improve this type of exercise?

SPEAKER

SITE OF ENGAGEMENT

PROCESS

GENERAL COMMENTS/COMPLAINTS
